



Heart of America Chapter
ATSSA



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RELEASE FORM

This document confirms the agreement between you and The American Traffic Safety Services Foundation (ATSSF) regarding your participation in the 2007/2008 ATSSF Work Zone Poster Contest.

You hereby irrevocably grant to ATSSF (and its affiliate, The American Traffic Safety Services Association (ATSSA), or other affiliates not now named) perpetually, exclusively, and for all media (print, electronic, video or any other formats), the right to use the artwork submitted for this contest through your child's school, and any reproductions of that artwork, and to identify your child as the artist, in any promotional materials at the exclusive discretion of ATSSF and its affiliates.

You hereby agree that you will not bring or consent to others bringing any claim or action against ATSSF or its affiliates on the grounds that the identification of your child by name as the artist, or the use of anything contained in the artwork or in the promotion thereof, violates any rights whatsoever, including without limitation rights of privacy and publicity. You hereby release ATSSF, its directors, officers, successors and assigns, as well as those of its affiliates, from any and all claims, demands, actions, causes of action, suits, costs, expenses, liabilities, and damages whatsoever that you may hereafter have against ATSSF and/or its affiliates in connection with the artwork or the identification of your child as the artist.

This agreement shall not obligate ATSSF or its affiliates to use the name of the artwork, or to use any of the rights granted hereunder, or to prepare, produce, exhibit, distribute or in any way exploit the artwork.

ATSSF shall retain the right to assign its rights hereunder without your consent, in whole or in part, to any person, firm, organization, or corporation.

AGREED TO AND ACCEPTED this _____
(Month, Day, Year)

Signature of Parent or Guardian

Witness

Print Name of Parent or Guardian: _____

Print Name of Child/Artist: _____

Home Telephone Number: _____

Name of School: _____

School Address _____

School Telephone Number: _____